

Federal Communications Commission (FCC) Experimental Licensing System – Program Experimental License

User Manual Prepared for:

Federal Communications Commission Office of Engineering
Technology

October 2016



Completing an Application for Program Experimental License (Form 442)

Program Experimental License: This type of license is issued to qualified institutions to conduct an ongoing program of research and experimentation, under a single experimental authorization subject to the requirements of subpart E of Part 5 of the FCC's rules. Program experimental radio licenses are available to colleges, universities, research laboratories, manufacturers of radio frequency equipment, manufacturers that integrate radio frequency equipment into their end products, and medical research institutions.

To apply for Program Experimental License, select the Form 442 hyperlink. The following page appears.

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Office of Engineering and Technology

FCC > FCC E-filing > ELS > FCC FORM 442

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FCC Site Map

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Dashboard For Experimental Radio Station Authorization (Form 442)

Please select one of the below links to start the process:

Experimental License Types:

- [Conventional Experimental License](#)
- [Program Experimental License](#)
- [Medical Testing License](#)
- [Compliance Testing License](#)

Filing Options

- [Form 405 - License Renewal](#)
- [Form 442 - New License/Modification of License](#)
- [Form 702 - Assignment of License](#)
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Please send any comments or suggestions for this site to [ELB Systems and Support](#)

Federal Communications Commission
445 12th Street, SW
Washington, DC 20554
[More FCC Contact Information...](#)

Phone: 888-CALL-FCC (225-5322)
TTY: 888-TELL-FCC (835-5322)
Fax: 202-418-0232
E-mail: fccinfo@fcc.gov

- [Web Policies & Privacy Statement](#)
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- [Freedom of Information Act](#)

Exhibit 1-1: Landing Page for Experimental Licenses (Form 442)

The following fields appear:

Field	Definition
<u>Experimental License Types:</u>	
Conventional Experimental License	Conventional Experimental License is an option for applicants to apply, if they do not qualify for the following three license types.
Program Experimental License	This type of license is issued to qualified institutions to conduct an ongoing program of research and experimentation, under a single experimental authorization subject to the requirements of subpart E of Part 5 of the FCC's rules. Program experimental radio licenses are available to colleges, universities, research laboratories, manufacturers of radio frequency equipment, manufacturers that integrate radio frequency equipment into their end products, and medical research institutions.
Medical Testing License	This type of license is issued to hospitals and health care institutions that demonstrate expertise in testing and operation of experimental medical devices that use wireless telecommunications technology or communications functions in clinical trials for diagnosis, treatment or patient monitoring.
Compliance Testing License	This type of license is issued to laboratories recognized by the FCC to perform: (i) Product testing of radio frequency equipment, and (ii) Testing of radio frequency equipment in an Open Area Test Site.

Please note: The following screen shots apply to *Program Experimental License*.

Click on the second link, Program Experimental License, the following page opens up:

The screenshot displays the FCC's Office of Engineering and Technology (OET) website. The top navigation bar includes links for Search, RSS, Updates, E-Filing, Initiatives, Consumers, and Find People. The main header identifies the FCC and OET. Below this, a breadcrumb trail shows the path: FCC > FCC E-filing > ELS > Program Experimental License. A red banner states, "This is the UAT Version of ELS." The left sidebar contains sections for "Filing Options" (including Form 405, Form 442, Form 702, Form 703, and Special Temporary Authority) and "Reports" (including Application Status, Call Sign Search, Generic Search, and Point Radius Search). The main content area is titled "Application For New or Modified Program Experimental License" and explains that the application is for location authorization only. It provides a link to the experiment Notification system registration website. Below this, the "Application Purpose:" section requires the user to select one of two options: "New Program Experimental License: All New Data" or "Modification of Existing License (Specify callsign):" with an adjacent text input field. A link for "How to file Program Experimental License" is also present. At the bottom of the form area are "Proceed" and "Clear" buttons.

Exhibit 1-2: Application for Program Experimental License

Please indicate if this is for a new program or an existing one?

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Office of Engineering and Technology

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Application for Program Experimental License

* - Indicates that this field must be completed before this page can be submitted.

*Applicant's FCC Registration Number (FRN):

*Applicant (Company) Name:

*Attention To:

*Street Address (If no P.O. Box):

*P.O. Box (If no Street Address):

*City:

*State (If Country is United States):

*Zip Code (If Country is United States):

Country (If not the United States):

*E-mail Address:

Save & Continue »

Last Reviewed/Updated o


Exhibit 1-3: Program Experimental License Applicant Information (Form 442)

Please complete all required fields marked by '*'


The following fields appear on the form:

Field	Definition
<u>Name of Applicant (Company):</u>	
Name of Applicant	Enter the full name of the applicant. For modification of existing licenses, this field is pre-filled.
<u>Mailing Address:</u>	
Attention:	Enter the full name of the contact person. For modification of existing licenses, this field is pre-filled.
Street Address	Enter the street address of the applicant. For modification of existing licenses, this field is pre-filled.
P.O. BOX	If a post office box is provided, enter it into this field. For modification of existing licenses, this field is pre-filled.
City	Enter the applicant's city in this field. For modification of existing licenses, this field is pre-filled.
State	Enter the applicant's state in this field. For modification of existing licenses, this field is pre-filled.
Zip/Postal Code	Enter the zip and/or postal code of the applicant in this field. For modification of existing licenses, this field is pre-filled.
Country	If the address is located outside the United States of America, select the country name in this field.

Email Address	Enter the applicant's e-mail address. The e-mail address format is as follows: name@company.ext
---------------	---


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Program Experimental License Questions

* - Indicates that this field must be completed before this page can be submitted.

Eligibility Questions

* Applicant must be one of the following:

☐ College or University with a graduate research program in engineering that is accredited by the Accreditation Board for Engineering and Technology (ABET)
☐ Research Laboratory
☐ Hospital or health care institution
☐ Manufacturer of radio frequency equipment
☐ Manufacturer that integrates radio frequency equipment into their end products

* Is an Orbital debris mitigation plan required by 5.64 of this part?

☐ Yes ☐ No

* Does the applicant require non-disclosure of proprietary information as part of the justification of this license?

☐ Yes ☐ No

* Will this license involve a product development or market trial?

☐ Yes ☐ No

* Is applicant a foreign government or a representative of a foreign government?


☐ Yes ☐ No

* APPLICANT ANTI-DRUG ABUSE CERTIFICATION:
By checking "YES", the individual applicant certifies that he or she is eligible for this license. This requires that he or she is not subject to a denial of federal benefits, including FCC benefits, as a result of a drug offense conviction pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. 882. A non-individual applicant, e.g., corporation, partnership or other unincorporated association, certifies that no party to the application is subject to a denial of federal benefits, pursuant to that section. For definition of a "party" for these purposes, see 47CFR 1.2002(b).

☐ Yes ☐ No

Exhibit 1-4: Program Experimental License Applicant Information (Form 442) Continued

Please complete all required fields marked by '*'



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Program Experimental License Questions

* - Indicates that this field must be completed before this page can be submitted.

Do you intend to use any of the federal exclusive and shared frequencies?

☐ Yes
☐ No

Do you intend to operate on commercial mobile radio service (CMRS)?

☐ Yes
☐ No

Do you intend to operate on public safety frequencies?

☐ Yes
☐ No

Give the following information of person who can best handle inquiries pertaining to this application:

* Last Name:

* First Name:

* Title:

* Phone Number:

* E-mail Address:

* Insert a short description of the purpose of this application, or for modifications describe what is being modified:

(Maximum 255 characters) You have characters left.

Save & Continue »

Exhibit 1-5: Program Experimental License Applicant Information (Form 442) Continued

Please complete all required fields marked by '*'

The application site will guide you to enter Technical Data next:

Experimental license location information page

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Miscellaneous

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Experimental License Location Information

*State:

County:

*City:

*Street Address:


Click on "Refresh Map" to load map, then click on the polygon below, to draw your proposed experimental location.

1000 km
1000 mi



* - Indicates that this field must be completed before this page can be submitted.

Last Reviewed/U

Exhibit 1-8: Program Experimental Location Information

- All fields with a * must be filled out
- After filling out all the required fields click on the "Refresh Map" button.
- Click the draw polygon button .
- Using your mouse click along the area where the license will be located at. The last click should end at the first dot/point created/clicked.

4-9

- To edit the shape click on the edit layers button . Your shape will change color. Click on the white dot outside of the shape to expand or contract the size of the shape.
 - To delete a shape click on the button with the garbage can . Next click on the shape and the shape should disappear. Click save, this will complete the deletion process.
- Click the "Save & Continue" button to move to the next page.

When you're done with this page, you should see a graph similar to the one below, outlining the proximity of location.

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Experimental License Location Information


*State:

County:

*City:

*Street Address:


Click on "Refresh Map" to load map, then click on the polygon below, to draw your proposed experimental location.




* - Indicates that this field must be completed before this page can be submitted.

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Exhibit 1-9: Program Experimental Location Information (completed)


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Summary for the Program Experimental License with File Number 0149-EX-PN-2016 and Confirmation Number EL222240

Application for Program Experimental License

Applicant's FCC Registration Number (FRN): 0001785260
Applicant (Company) Name: Acme Surveillance Supplies
Attention To: Sean Connery
Street Address: 820 Pollin Lane
P.O. Box:
City: Vienna
State: Virginia
Zip Code: 22180
Country (if not the United States): United States
E-mail Address: sean.connery@noemail.com

Eligibility Questions

Applicant must be one of the following:
College or University with a graduate research program in engineering that is accredited by the Accreditation Board for Engineering and Technology (ABET)
Research Laboratory YES
Hospital or health care institution
Manufacturer of radio frequency equipment
Manufacturer that integrates radio frequency equipment into their end products

Is an Orbital debris mitigation plan required by 5.64 of this part NO
Does the applicant require non-disclosure of proprietary information as part of the justification of this license? NO
Will this license involve a product development of market trial? NO
Is applicant a foreign government or a representative of a foreign government? NO

Drug Abuse Question

APPLICANT ANTI-DRUG ABUSE CERTIFICATION: By checking "YES", the individual applicant certifies that he or she is eligible for this license. This requires that he or she is not subject to a denial of federal benefits, including FCC benefits, as a result of a drug offense conviction pursuant to section 501 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. 862. A non-individual applicant, eg., corporation, partnership or other unincorporated association, certifies that no party to the application is subject to a denial of federal benefits, pursuant to that section. For definition of a "party" for these purposes, see 47CFR 1.2002(d).
YES

Program Experimental License Questions

Has applicant or any party to this application had any FCC station license or permit revoked or any application for permit, license or renewal denied by this Commission? NO
Do you intend to use any of the federal exclusive and shared frequencies? NO
Do you intend to operate on commercial mobile radio service (CMRS)? NO
Do you intend to operate on public safety frequencies? NO

Give the following information of person who can best handle inquiries pertaining to this application:

Last Name: Connery
First Name: Sean
Title: Chief Information Officer
Phone Number: 7035551212
E-mail Address: Sean.Connery@NoEmail.com

Insert a short description of the purpose of this application, or for modifications describe what is being modified.

Narrative Comment: Testing the Program Experimental License System

11. 3. 2017

Give the following information of person who can best handle inquiries pertaining to this application:

Last Name: Connery
First Name: Sean
Title: Chief Information Officer
Phone Number: 7035551212
E-mail Address: Sean.Connery@NoEmail.com

Insert a short description of the purpose of this application, or for modifications describe what is being modified.

Narrative Comment: Testing the Program Experimental License System

Certification

THE APPLICANT CERTIFIES THAT:

- The radio frequency experimentation will be conducted in a defined geographic area under the applicant's control; and
- The applicant has institutional processes to monitor and effectively manage a wide variety of research projects; and
- The applicant has demonstrated expertise in radio spectrum management or partner with another entity that such expertise.

THE APPLICANT FURTHER CERTIFIES THAT:

- All the statements in the application and attached exhibits are true, complete and correct to the best of the applicant's knowledge; and
- The applicant is willing to finance and conduct the experimental program with full knowledge and understanding of the above limitations; and
- The applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the USA.

Authorized Party to Sign

Signature Date: 2016-11-01 12:00:28.713
Signature of Applicant (Authorized person filling application): Sean Connery
Title of Person Signing Application: Chief Information Officer

WILLFUL FALSE STATEMENTS MADE ON THIS APPLICATION ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

NOTIFICATION TO INDIVIDUALS UNDER PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1980

Information requested through this form is authorized by the Communications Act of 1934, as amended, and specified by Section 308 therein. The information will be used by Federal Communications Commission staff to determine eligibility for issuing authorizations the frequency spectrum and to effect the provisions of regulatory responsibilities rendered by the Commission by the Act. Information requested by this form will be available to the public unless otherwise requested pursuant to 47 CFR 0.459 of the FCC Rules and Rules. Your response is required to obtain this authorization.

Public reporting burden for this collection of information is estimated to average four (4) hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0065), Washington DC 20554. DO NOT send completed applications to this address. Individuals are not required to respond to this collection unless it displays a currently valid OMB control number.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PL. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, PL. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507

Location Information

State: Virginia
County: FAIRFAX
City: Vienna
Street Address: 820 Follin Lane
Approximate Center of Operation
North Latitude: 38 ° 54 ' 15 " N
West Longitude: 77 ° 14 ' 51 " W

Accept

Add Data / Make Changes

performance-testing-system

10

Exhibit 1-11: Summary page for Program Experimental License submission (continued)


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Submit ELS Attachments

NOTICE: Please be sure the following exhibits have already been submitted:
[Click Here For Attachment Submission Instructions](#)

Applicant Eligibility: Criteria set forth in Part 5 subpart E of Commission Rules

Description: *

Exhibit Type: *

File Format: *

File Location: * No file selected.

* - This field is required.

Filing Options

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Exhibit 1-12: Program Experimental License Submit ELS Attachments

When submitted successfully, you'll see the following type of message:

The screenshot shows the FCC E-File system interface. At the top, there's a blue header with the FCC logo and navigation links: Search, RSS, Updates, E-Filing, Initiatives, and Consumer. Below this is a yellow banner for the "Office of Engineering and Technology". The main content area has a red message: "This is the UAT Version of ELS." Below this, a text instruction states: "In order to complete this process the **Complete Submission** button must be clicked." There are two buttons: "Complete Submission" and "Add More Attachments". Below these is a table with the following data:

Upload Status	File Size (bytes)	File Description	File Format
Success	132017	Details	Jpeg

On the left side, there are several menu sections: "Filing Options" with links for Form 405, Form 442, Form 702, Form 703, Special Temporary Authority, Add Attachments, Reply to Correspondence, Amend/Complete Application, Return to 159 Form, and File an Informal Objection; "Reports" with links for Application Status, Call Sign Search, Generic Search, and Point Radius Search; and "Miscellaneous" with links for Get FRN, ELS Notification Website, User's Manual, Get Software, and FAQ. At the bottom, there's a footer with the text: "Please send any comments or suggestions for this site to [ELB Systems and Support](#)" and "Last Reviewed/Upd".

Exhibit 1-13: Program Experimental License - ELS Attachments Successfully Submitted

When you're ready to submit required fees, click on Complete Submission and you'll receive the following message, and be directed to the appropriate page.

The screenshot shows a dialog box with a light gray background. At the top, there are two buttons: "Complete Submission" and "Add More Attachments". The main text in the dialog box reads: "Do not use this feature if you have already paid for this application. Press OK to proceed to the Form 159, even if you are fee-exempt and have not previously proceeded to the Form 159. If you have already paid, or are fee-exempt and have previously completed submission of this application, press Cancel to indicate you have completed this filing." At the bottom right, there are two buttons: "OK" and "Cancel".

Exhibit 1-13: Last Step: Submit Payment for Program Experimental License